



MENDOCINO COUNTY OFFICE OF EDUCATION

PAUL A. TICHININ, SUPERINTENDENT OF SCHOOLS

2240 Old River Road • Ukiah, CA 95482-6156 • 707 467-5000 • Fax 707 462-0379

INTEGRITY • CUSTOMER SERVICE • ACCOUNTABILITY • TEAMWORK • INNOVATION • PASSION

Emergency Medical Responder Application October 7, 2014 – December 18, 2014

Print and **COMPLETE** application and then mail or turn in to our office.

Course Schedule: Class held Tuesday and Thursday evenings, 6:00 – 9:00 pm
Course includes one Saturday class, TBA

Instructor: Anthony Macedo, amacedo@mcoe.us or (707) 972-6483

Location: Bill Platt Training Center
Coast Life Support Headquarters
38901 Ocean Drive, Gualala CA 95445

Textbook to be distributed on first day of class

Fees and Payment Information: \$150 to register

Remit payment to: Mendocino County Office of Education-Coast Office, 300A Dana Street, Fort Bragg, CA 95437

PERSONAL INFORMATION

Last Name					First Name					M.I.				
Date of Birth					Email address									
Street Address					Apt. #		City		State		Zip			
Home Telephone					Cell Phone									
Parent/Guardian Name					(if applicable)					Contact number for Parent/Guardian				
Emergency Contact					Telephone					Relationship				



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CTE Medical Programs

Requirements and Expectations

The goal of CTE Medical Programs is to prepare students to become competent, confident, and skilled in the medical profession. In addition, you will receive the training necessary to prepare you for the state exam.

Listed below are requirements and expectations for class participation.

Please read and check off the following information.

Student must:

_____ Be free of infectious disease

_____ Maintain hands and arms free of disease (no acrylic nails)

_____ Meet and pass the medical requirements of the Physical Evaluation form, prior to entering the externship (if required by externship site).

In addition, students must agree to the following:

_____ Interact in a positive and professional manner with instructors, fellow students, and training staff

_____ Comply with classroom/training site attire/appearance requirements

_____ Attend class, on time, as scheduled by the instructor

_____ Behave and perform in a professional manner while completing hours at Externship site

Your signature below acknowledges that you are verifying the information to be true and correct and that you understand and accept the class requirements.

Student Signature

Date